

MUCCOX										
ADDITION										
DOCUMENT TYPE	ORG CONDITION				R/N	R/N DESTINATION			EFFECTIVE DATE	
MODIFICATION				1						
DOCUMENT TYPE		STAGE NAME	STAGE NAME		RULE NAME		EFFECTIVE DATE			
		CLIRR	ENT				CHANGE			
		CUNN	CURRENT		OT/MACE					
CONDITION										
ACTION										
DECTINIATION										
DESTINATION										
DELETION										
DOCUMENT TYPE		STAGE NAME RULE N		NAME	DISABLE/DELETE		ETE	EFFECTIVE DATE		
JUSTIFICATION/COMM	IENTS									
REQUESTED BY					PHONE NUMBER					
AGENCY C						DATE	DATE SUBMITTED			
APPROVAL SIGNATUR	E					DATE	É			
	OW ADMINIS	STRATOR USE ONLY		T						
PROCESS ASSIGNMENT		STAGE	STAGE							
		PRESENCE	PRECEDENCE		WORKCHOLIB			WORKED WORKSPOLID		
		PRECEDENCE	PRECEDENCE		WORKGROUP			WORKER-WORKGROUP		
NOTES										
NOTES										
DATE RECEIVED		SIGNATURE	SIGNATURE			DATE COMPLET				

MO 300-1623 (6-99) SAM II